### **DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or a joint inventor (if plural names are listed below) of the invention entitled

MO	DIFIED PEPTIDES A	AS THERAPEUTIC A	AGENTS	
which is described and	d claimed in the spec	ification which:		
	is attached hereto.			
$\boxtimes$	was filed on Octo	ober 22, 1999	· 	
	as Application Seria	ıl No.		
	and was amended	on	(if applicable)	
I hereby state that I hat the claims, as amende			nts of the above identified specifica	ation, including
I acknowledge the dut	•		ul to the examination of this application.	tion in

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

	PRIOR FOR	EIGN APPLICATION(S)	
Country	Application Number	Filing Date (day, month, year)	Priority Claimed
			<del> </del>

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.

PROVISIONAL AP	PLICATIONS(S)	
Application Number 60/105,371	Filing Date (day, month, year) October 23, 1998	

### **DECLARATION AND POWER OF ATTORNEY (cont'd)**

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the filing date of this application:

PRIOR U	I.S. APPLICATIONS	<del></del>
APPLICATION SERIAL NO.	FILING DATE	STATUS

<u>Power of Attorney</u>: As a named inventor I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Ron K. Levy, Registration No.: 31,539; Steven M. Odre, Registration No.: 29,094; and Timothy J. Gaul, Registration No.: 33,111 said attorney(s)/agent(s) to have in addition full power of revocation, including the power to revoke any power herein granted.

Please send all future correspondence to:

Direct Telephone Calls To:

U.S. Patent Operations/TJG
Dept. 430, M/S 27-4-A
AMGEN INC.
One Amgen Center Drive
Thousand Oaks, California 91320-1799

Timothy J. Gaul Attorney/Agent for Applicant(s) Registration No.: 33,111 Phone: (805) 447-2688

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full Name of Sole or First Inventor:	Ulrich Feige
Inventor's Signature:	Un '/ Date: 10-26-99
•	
Residence and	V
Post Office Address:	3117 Deer Valley Avenue, Newbury Park, California 91320 U.S.A.
	(Address, City, State, Zip Code, Country)
Citizenship:	German
•	

## DECLARATION AND POWER OF ATTORNEY (cont'd)

Full Name of Second Joint Inventor, if Any:	Chuan-Fa Liu
Inventor's Signature:	Date:
Residence and Post Office Address:	1425 Clover Creek Drive, Longmont, Colorado 80503 U.S.A.  (Address, City, State, Zip Code, Country)
Citizenship:	
Full Name of Third Joint Inventor, if Any:	Janet C. Cheetham
Inventor's Signature:	Jant C. Chechan Date: 11/10/99
Residence and Post Office Address:	1695 East Valley Road, Montecito, California 93108 U.S.A.  (Address, City, State, Zip Code, Country)
Citizenship:	United kingdom Citizen
Full Name of Fourth Joint Inventor, if Any:	Thomas Charles Boone  Thomas Charles Boone  Date: 10/26/99
Inventor's Signature:	Thomas Charles Borne Date: 10/26/99
Residence and Post Office Address:	3010 Deer Valley Avenue, Newbury Park, California 91320 (Address, City, State, Zip Code, Country)
Citizenship:	U.S. Citizen

#### **DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

the claims, as amended by any amendment referred to above.

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or a joint inventor (if plural names are listed below) of the invention entitled

#### MODIFIED PEPTIDES AS THERAPEUTIC AGENTS

which is described and	d claimed in the specification	which:	
	is attached hereto.  was filed on October 22, as Application Serial No.	1999	
	and was amended on	(if applicable)	
I hereby state that I ha	ave reviewed and understan	d the contents of the above identifi	ed specification, including

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56 (a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

<del> </del>	PRIOR FOR	EIGN APPLICATION(S)	
Country	Application Number	Filing Date (day, month, year)	Priority Claimed
			+

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.

PROVISIONAL APPLICATIONS(S)		
Application Number	Filing Date (day, month, year)	
60/105,371	October 23, 1998	

#### **DECLARATION AND POWER OF ATTORNEY (cont'd)**

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the filing date of this application:

PRIOR U	.S. APPLICATIONS	
APPLICATION SERIAL NO.	FILING DATE	STATUS

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Ron K. Levy, Registration No.: 31,539; Steven M. Odre, Registration No.: 29,094; and Timothy J. Gaul, Registration No.: 33,111 said attorney(s)/agent(s) to have in addition full power of revocation, including the power to revoke any power herein granted.

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Timothy J. Gaul Attorney/Agent for Applicant(s) Registration No.: 33,111 Phone: (805) 447- 2688

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Full Name of Sole or First Inventor:	Ulrich Feige
Inventor's Signature:	Date:
Residence and Post Office Address:	3117 Deer Valley Avenue, Newbury Park, California 91320 U.S.A.
rost Office Address.	(Address, City, State, Zip Code, Country)
Citizenship:	

# DECLARATION AND POWER OF ATTORNEY (cont'd)

Full Name of Second		
Joint Inventor, if Any:	Chuan-Fa Liu	_
Inventor's Signature:	Muanta Lin	_ Date: October 27, 1999
Residence and	J	
Post Office Address:	1425 Clover Creek Drive, Longmont, Co	
Citizenship:	China (Address, City, Sta	tte, Zip Code, Country)
Full Name of Third Joint Inventor, if Any:	Janet C. Cheetham	_
Inventor's Signature:		Date:
Residence and Post Office Address:	1695 East Valley Road, Montecito, Calife	ornia 93108 U.S.A.
		te, Zip Code, Country)
Citizenship:	· · · · · · · · · · · · · · · · · · ·	_
Full Name of Fourth		•
Joint Inventor, if Any:	Thomas Charles Boone	_
Inventor's Signature:	•	Date:
mvontor o orginaturo.		
Residence and		
Post Office Address:	3010 Deer Valley Avenue, Newbury Par	
	•	te, Zip Code, Country)
Citizenship:	U.S. Citizen	